FUTURE LEADERS BY AFFILIATION



Affiliation "Is the act of becoming formally connected or joined"

TEEN PROGRAM APPLICATION



Future Leaders by Affiliation Teen Program Application

Applicants must complete and submit the application form to receive an interview date. The reference form may be submitted the day of interview.

Teen School Information
Current School School Address
School Phone Number () Student Activities Director
Current Grade
Student ID #
Teen Profile Information
First Name Middle Initial Last Name
Home Address
City State Zip Code
Home Phone () Cell Phone () Alternate ()
Teen Email Address (required)@com
Ethnicity and Race
() Black/African American () White Non-Hispanic () American Indian () Hispanic () Other
Gender () Male () Female
Parent/Guardian Information
First Name Middle Initial Last Name
First Name Middle Initial Last Name
Home Address
City State Zip Code
Home Phone ()Cell Phone ()Alternate ()
Email Address (required)@com
Parent Signature Date/ Date
Teen Applicant Signature

Date

Teen Signature

Reference

The reference form can be submitted the day of your interview. References that live in the same household will not be accepted, please provide information from two different references.

Reference 1
First Name Middle Initial Last Name
How long have you known the applicant? Are you related to the applicant?
How do you know the applicant? () Teacher () Coach () Pastor () Family Friend () Other
Tell us why we should select the applicant
Can we contact you should we need further information? () Yes () No
Reference Contact Number ()
What is the best time to contact you? () Morning:am () Afternoon:pm () Evening:pm
Reference Signature Date
Reference 2
First Name Middle Initial Last Name
How long have you known the applicant? Are you related to the applicant?
How do you know the applicant? () Teacher () Coach () Pastor () Family Friend () Other
Tell us why we should select the applicant
Can we contact you should we need further information? () Yes () No
Reference Contact Number ()
What is the best time to contact you? () Morning:am () Afternoon:pm () Evening:pm
Reference Signature Date
Staff Use Only
Reference Checked By Date
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PARKS & RECREATION DEPARTMENT

It Starts In Parks!

Parent Letter

Dear Parent/Guardian:

We are pleased to have your son/daughter as a participating member of Future Leaders by Affiliation Teen Program. Please be advised that our teen program consist of various activities, workshops and/or events that will require your child's participation. It is important that you provide us with an e-mail address that is checked by you regularly, so that we can keep you informed of program activities.

We expect our teen members to display leadership qualities and it is the responsibility of Future Leaders by Affiliation Teen Program members to sign in and out daily. In the event, that we notice inconsistencies in your child's participation, we will make it a priority to notify you of the matter.

Sincerely,

Shacora R. Jackson

Shacora R. Jackson

Recreation Leader I / Teen Program